

Research Service

PRIVACY OFFICE REVIEW OF RESEARCH PROJECTS

Standard Operating Procedures (SOP)

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1. PURPOSE

To identify the necessary steps in determining which research projects require a privacy review and the associated review process.

2. PRIVACY REVIEW REQUIREMENT FOR RESEARCH STUDIES

- 1. The following research studies are to be submitted to the Privacy Office for review:
 - a. All NEW human subjects' research studies.
 - b. All human subjects' research studies submitted as part of the **ANNUAL REVIEW OR AMENDMENT/MODIFICATION** process, **IF** the following conditions exist:
 - ✓ Changes in how VA data is used
 - ✓ Changes in how VA data is accessed
 - ✓ Changes in how VA data is disclosed
 - ✓ Changes to the HIPAA Authorization
 - ✓ Changes to or the application for a HIPAA Waiver
 - ✓ Changes to the Informed Consent that affects how the research uses, access, and discloses Veterans data

3. PROCEDURE

- 1. The IRB Administrator will provide email notification to the Privacy Officer (PO) upon electronic posting of completed research packets. The email will have a hyperlink to the documents to be reviewed.

 - b. The IRB Administrator will post a copy of the application packet and the MIRB reviewer notice for the application packet, in the "PO Assigned Reviews" folder, for the study.
 - c. The IRB Administrator will send email notification to the PO as stated above.

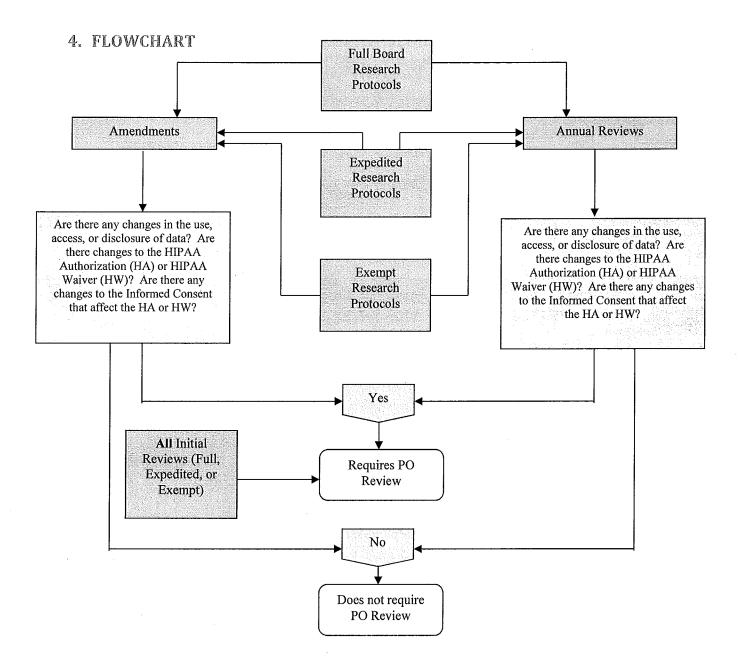
2. First PO Review

- a. Full IRB Committee research studies requiring a privacy review will be submitted to the Privacy Officer a minimum of **15 business days** prior to the IRB meeting.
- b. Expedited and Exempt studies requiring a privacy review will be submitted to the Privacy Officer a minimum of **15 business days** prior to the IRB meeting at which time they are presented on the IRB Agenda.
- c. The PO will interact with the investigative team to finalize privacy requirements.

- d. The PO will complete the required review using the privacy checklist (Attachment A) and MIRB reviewer notice, within **8 business days** so that the IRB Administrator or designee can distribute the meeting materials to IRB members one week to 10 days prior to each meeting.
- e. If the PO determines that revisions are required the following process shall be used:
 - 1) The PO will contact the PI and/or Study Contact person listed on the first page of the application and CC Research Service at <u>v21macresearchinbox@va.gov</u>.
 - 2) The PO will communicate the problems identified during the PO review and provide instruction, guidance, and information needed to resolve the problem.
 - 3) The PI and/or Study Contact person will submit the revisions to Research Service and CC the PO.
 - i. If the revisions are not sent to the PO, Research Service will send a copy of the revised documents to the PO.
 - 4) The PO will review the revised documents and determine if the revisions are appropriate.
 - 5) The PO will communicate the determination in item 4 above to Research Service within 2 business days.
- g. The PO will post a signed copy of the privacy checklist and MIRB reviewer notice, in the "PO Completed Reviews" folder, for the study.
- h. The PO will send email notification to the IRB Administrator upon electronic posting of completed PO review. The email will have a hyperlink to the document containing the signed PO review.

3. Second/Final Privacy Officer

- a. Following final IRB Approval, the PO will review the Waiver of Authorization Determination Letter and complete the required review using the privacy checklist and MIRB reviewer notice.
- c. The PO will post a signed copy of the privacy checklist and MIRB reviewer notice, in the "PO Completed Reviews" folder, for the study, within 2 business days.
- d. The PO will send email notification to the IRB Administrator upon electronic posting of the completed PO review. The email will have a hyperlink to the document containing the finalized PO review.



5. REFERENCES:

2011 Local Accountability for Research Meeting/ORO & VHA Privacy; VHA Handbook 1605.

6. SIGNATURE BLOCK

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